

Application Data Sheet**Application Information**

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| Application Type:: | Regular |
| Subject Matter:: | National Phase |
| Suggested Group Art Unit:: | N/A |
| CD-ROM or CD-R?:: | None |
| Sequence submission?:: | None |
| Computer Readable Form (CRF)?:: | No |
| Title:: | ANTIMYCOTIC NAIL VARNISH |
| Attorney Docket Number:: | 3493-0160PUS1 |
| Request for Early Publication?:: | No |
| Request for Non-Publication?:: | No |
| Total Drawing Sheets:: | 0 |
| Small Entity?:: | No |
| Petition included?:: | No |
| Secrecy Order in Parent Appl.?:: | No |

Applicant Information

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| Applicant Authority Type:: | Inventor |
| Primary Citizenship Country:: | France |
| Status:: | Full Capacity |
| Given Name:: | Pascal |
| Family Name:: | LEFRANCOIS |
| City of Residence:: | Lavaur |
| Country of Residence:: | France |
| Street of mailing address:: | 21, rue du Père Colin |
| City of mailing address:: | Lavaur |
| Country of mailing address:: | France |
| Postal or Zip Code of mailing address:: | 81500 |

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| Applicant Authority Type:: | Inventor |
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Primary Citizenship Country:: France
Status:: Full Capacity
Given Name:: Roger
Family Name:: NAVARRO
City of Residence:: Pamiers
Country of Residence:: France
Street of mailing address:: Rive Neuve du Crieu Route de Belpech
City of mailing address:: Pamiers
Country of mailing address:: France
Postal or Zip Code of mailing address:: 09100

Applicant Authority Type:: Inventor
Primary Citizenship Country:: France
Status:: Full Capacity
Given Name:: Marlène
Family Name:: DELAUNOIS
City of Residence:: Cessales
Country of Residence:: France
Street of mailing address:: Bordenoble
City of mailing address:: Cessales
Country of mailing address:: France
Postal or Zip Code of mailing address:: 31290

Correspondence Information

Correspondence Customer Number:: 02292

Representative Information

Representative Customer Number:: 02292

Domestic Priority Information

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|------------------|-------------------|----------------------|----------------------|
| Application:: | Continuity Type:: | Parent Application:: | Parent Filing Date:: |
| This Application | National Stage of | PCT/FR2004/002019 | 07/28/04 |

Foreign Priority Information

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|-----------|----------------------|---------------|--------------------|
| Country:: | Application number:: | Filing Date:: | Priority Claimed:: |
| France | 0309303 | 07/29/03 | Yes |

Assignee Information

Assignee name:: Pierre Fabre Dermo-Cosmetique
Street of mailing address:: 45, place Abel Gance
City of mailing address:: Boulogne-Billancourt
Country of mailing address:: France
Postal or Zip Code of mailing address:: F-92100